



Children's Health Care

Background

For years, Washington had been aggressive in its efforts to broaden access to health care services for children through expansions of the Medicaid program. However, in the face of significant budget shortfalls in 2002 and 2003, the Legislature made a number of policy and funding decisions that resulted in the loss of health care for an estimated 40,000 to 60,000 children. Currently, through Medicaid, the state provides health care for about 550,000 children.

Solution

This session, we reversed decisions made in 2002 and 2003 that transferred about 28,000 immigrant children from the Medicaid (state-only dollars) program to the less comprehensive Basic Health Plan; authorized the charging of premiums for children from families with incomes between 150 and 200 percent of the federal poverty level who are eligible for regular Medicaid; and allowed eligibility to be reviewed every six months instead of annually.

Session Victories

During the 2005 session, the Legislature reversed the policy decisions made in 2002 and 2003 and provided funding that is expected to result in an additional 38,000 children having access to health care services. More specifically, the Legislature:

- Eliminated the premiums that were going to be imposed last year (resulting in 4,200 more children having coverage).
- Eliminated administrative hassles that were keeping many children from maintaining enrollment (25,000 more children, \$32.7 million state funds).
- Provided sufficient funding (\$9.4 million) to allow about 8,750 immigrant children to receive coverage through a state-only funded Medicaid program.

Other health-related budget items:

- **Basic Health Plan.** Maintains coverage for 100,000 adults in the BHP.
- **Mental health services.** Provides funding (\$80.7 million) to make up for the federal government's cut in funding for mental health services, which are critical to maintaining public safety.

- **A targeted rate increase for Medicaid providers**, including family practice physicians who deliver babies in rural areas (\$34 million state funds).
- **No drug or transportation co-pays for Medicaid clients.**